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PTO/SB/01 (10-00)

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|--|---|------------------|------------------------|----------------------------|--------------------------|--------------------|--|
| DECLARATION | | | Attorney Docket Number | | LFS-5001USA-CIP | | |
| AND POWER OF ATTORNEY | | First Named | I Inventor | Lorin Olson, e | t al. | | |
| FOR UTILITY OR DESIGN | | | COMPLETE IF KNOWN | | | | |
| PATENT APPLICATION (37 CFR 1.63) | | | | | | | |
| · | • | rcharge | Application | Number | 10/706,166 | | |
| Declaration Submitted with Initial Filing | OR Initial Filing (Sur | | Filing Date | | 11/12/2003 | | |
| (37 CFR 1.16(e)) require | |) required) | Group Art U | nit | unknown | | |
| | Examiner N | ame | unknown | | | | |
| As a below named invento | r, I hereby declare tha | t: | | | | | |
| My residence, mailing address, and citizenship are as stated below next to my name. I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled: | | | | | | | |
| | CAP FOR A DERMAL TISSUE LANCING DEVICE (Title of the Invention) | | | | | | |
| the specification of which | | | | | | | |
| is attached hereto | | | | | | | |
| OR . | | | | | | | |
| was filed on (MM/DD/YYYY) 11/12/2003 as United States Application Number or PCT International Application Number 10/706,166 and was amended on (MM/DD/YYYY) | | | | | | | |
| I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. | | | | | | | |
| I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application. | | | | | | | |
| I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed. | | | | | | | |
| Prior Foreign | , | | Filing Date | Priority | | ified Copy | |
| Application Number(s) | Country | (MM/D | D/YYYY) | Not Claime | ed At | tached? | |
| | | | | | | | |
| Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: | | | | | | | |

| DECLARATION - Utility or Design Patent Application | | | | | | |
|---|---|---|--|--|--|--|
| I hereby claim the benefit under 35 U.S.C | . 119(e) of any United States provisional a | pplication(s) listed below. | | | | |
| Application Number(s) | Filing Date (MM/DD/YYYY) | | | | | |
| 60/426,683 | Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. | | | | | |
| I hereby claim the benefit under Title 35. Li | nited States Code, \$120 of any United State | s application(s) listed below and insofar | | | | |
| I hereby claim the benefit under Title 35, United States Code, §120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, §112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, §1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application: | | | | | | |
| Application Serial No. | Filing Date | Status | | | | |
| | Patented Patented Patented | | | | | |
| I hereby appoint: | | | | | | |
| Practitioners at Customer NumberAND | Place Customer Number Bar Code Label Here | | | | | |
| Practitioner(s) named below: Name Registration Number Mayumi Maeda 40,075 Bernard E. Shay 32,061 Mark Warfield 33,463 Paul Coletti 32,019 as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith. | | | | | | |
| Address all telephone calls to Mayumi Maeda at telephone number 408 956-4790. | | | | | | |
| Customer Number Direct all correspondence to: | | | | | | |
| Name: | | | | | | |
| Address: | | | | | | |
| Address: | | | | | | |
| City: | State: | ZIP | | | | |
| Country | Telephone: | Fax: | | | | |

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| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | | |
|---|--|-------------------------------|-----------------------------------|---------------------|------------------------|--|
| NAME OF SOLE OR FIRST INVENTOR: | AME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor | | | | | |
| Given Name (first and middle [if any]) LORIN | | Family Name or Surname | | OLSON | | |
| Inventor's Signature | 2 | | | Date 3-2 | .2-04 | |
| Residence: City Scotts Valley | State CA | Country USA | | ry USA | Citizenship USA | |
| Mailing Address 1230 Mount Herman Road | | · | | | | |
| City Scotts Valley | State CA | | ZIP 9 | | Country USA | |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | | |
| NAME OF SECOND INVENTOR: | □Ар€ | etition has | been fil | ed for this unsigne | ed inventor | |
| Given Name (first and middle [if any]) ANNE | | | Family Name or Surname THOMSON | | | |
| Inventor's Signature | | | | Date | | |
| Residence: City Inverness State Invern | | s-shire Country UK | | ry UK | CitizenshipUK | |
| Mailing Address 2 Ardross Place | , | | | | | |
| City Inverness | | State Inverness-shire ZIP IV3 | | | Country UK | |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | | |
| NAME OF THIRD INVENTOR: | A petition has been filed for this unsigned inventor | | | | ed inventor | |
| Given Name (first and middle [if any]) DAMIAN EDWARD HAYDON Family Name or Surname BASKEYFIELD | | | | | | |
| Inventor's Signature Date | | | | | | |
| Residence: City Inverness State Invernes | | s-shire | shire Country UK | | CitizenshipUK | |
| Mailing Address 14 Holmburn Place | | | | | | |
| City Inverness | State Invernes | s-shire | 7IP I\ | /2 3FD | Country HK | |

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|---|--------------------------------------|-----------------------------------|---------------------|------------------------|--|--|
| NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor | | | | | | |
| Given Name (first and middle [if any]) LORIN | | Family Name or Surname OLSON | | | | |
| Inventor's Signature | 1 | | Date | | | |
| Residence: City Scotts Valley | State CA | Coun | try USA | Citizenship USA | | |
| Mailing Address 1230 Mount Herman Road | | | | | | |
| City Scotts Valley | State CA | ZIP 9 | | Country USA | | |
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| NAME OF SECOND INVENTOR: | A pe | etition has been fi | led for this unsign | ed inventor | | |
| Given Name (first and middle [if any]) ANNE Family Name or Surname THOMSON | | | | | | |
| Inventor's Signature Date 18 FEB 2004 | | | | | | |
| STRATHPEFFER Residence: City Inverness | Ross - State Invernes | SHIRE s-shi re Coun | try UK | Citizenship UK | | |
| Mailing Address 2-Andress Place. DUART, COLF COURSE ROAD | | | | | | |
| STRATHPEPPER City Inverness | Rකss- State I nvern es | | 1V14 9AT | Country UK | | |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | | |
| NAME OF THIRD INVENTOR: | ☐ A pe | etition has been fi | led for this unsign | ed inventor | | |
| Given Name (first and middle [if any]) DAMIAN EDWARD HAYDON Family Name or Surname BASKEYFIELD | | | | | | |
| Inventor's D. Issobayfild. Date 19th Florway 2004. | | | | | | |
| Residence: City Inverness | State Invernes | s-shire Coun | try UK | Citizenship UK | | |
| Mailing Address 14 Holmburn Place | | | | | | |
| City Inverses | State Inverses | s-shire 71P I | V2 3FD | Country UK | | |

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|---|----------------|----------------|----------|------------------|-------------|-----------------------|
| NAME OF FOURTH INVENTOR: A petition has been filed for this unsigned inventor | | | | | ed inventor | |
| Given Name (first and middle [if any])CHRISTOPHER PHILIP Family Name or Surname LEACH | | | | | | |
| Inventor's Signature | | | | Date 18 Feb 2004 | | |
| Residence: City Inverness | State Inverne | ss-shire C | Countr | y UK | | Citizenship UK |
| Mailing Address 131 Miller Street | | | | | | |
| City Inverness | State Inverne | | | IV2 3DP | | Country UK |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | | |
| NAME OF FIFTH INVENTOR: | □ A p | etition has be | een file | ed for this | unsigne | ed inventor |
| Given Name (first and middle [if any]) FICHARD MICHAEL Family Name or Surname DAY | | | | | | |
| Inventor's Signature Date (> FCS OCC | | | | | | |
| Residence: City Cawdor, Nairn | State Invernes | s-shire C | Countr | y UK | | Citizenship UK |
| Mailing Address Whinhill Cottage | | | | | | |
| City Cawdor, Naim | | | | 12 5RF | | Country UK |
| I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon. | | | | | | |
| NAME OF SIXTH INVENTOR: A petition has been filed for this unsigned inventor | | | | | | |
| Given Name (first and middle [if any]) SEBASTIANS or Surname | | | | ВОНМ | | |
| Inventor's Signature | | | | Date | 18 | Cebruary |
| Residence: City Inverness | State Inverne | ss-shire C | Countr | y UK | | Citizenship German |
| Mailing Address 9 Muirfield Court | | | | | | |
| City Inverness | State Inverne | ss-shire Z | ZIP IV | /2 4DP | | Country UK |